

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Schuler et al.

Application No: 09/731,316  
Confirmation No: 1043

Filed: December 5, 2003

Title: SYSTEMS AND METHODS FOR TREATING PACKAGED POWDERS

Art Unit: 3734

Examiner: Mendoza, Michael G

Attorney Docket No: NK.0051.00  
[53247-US-CNT]

June 29, 2009  
San Francisco, CA 94107

Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

**Extension of Time**

Applicant requests an extension of time under 37 C.F.R. 1.136

Via EFS

Reply Brief  
 Drawing  
 (Supplemental) Information Disclosure Statement  
 PTO-1449 Form  
 Citations  
 Terminal Disclaimer  
 (2) Postcards for Return

Extension (Months)	Extension Fee	
	Large Entity	Small Entity
<input type="checkbox"/> One Month	\$130.00	\$65.00
<input type="checkbox"/> Two Months	\$490.00	\$245.00
<input type="checkbox"/> Three Months	\$1,110.00	\$555.00

**Total \$ 0.00**

Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.

**Fees for Extra Claims**

	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	63	63	0	\$52.00	\$26.00	\$0.00
Independent Claims	9	9	0	\$220.00	\$110.00	\$0.00
Multiple Dependent Claims			0	\$390.00	\$195.00	\$0.00
Supplemental Information Disclosure Statement						
						<b>Total</b> \$0.00

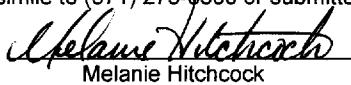
**Fee Payment**

Extension Fees	\$0.00
Fees for Extra Claims	\$0.00
<b>Total</b>	<b>\$0.00</b>

Attached is check no. \_\_\_\_\_ in the sum of \$0.00.  
 Please charge Deposit Account No. 10-0258 in the sum of \$ 0.00.

**CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a):**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below or via facsimile to (571) 273-8300 or submitted electronically via EFS:

By:   
Melanie Hitchcock

Date: June 29, 2009

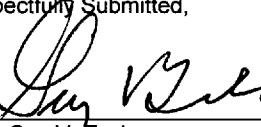
**Fee Deficiency**

If any additional extension and/or fee is required, please charge Deposit Account No. 10-0258.  
and/or  
 If any additional fee for claims is required, please charge Deposit Account No. 10-0258.

Please direct telephone calls to: Guy V. Tucker at (415) 538-1555  
Please continue to send correspondence to:

Novartis  
Corporate Intellectual Property  
One Health Plaza 104/3  
East Hanover, NJ 07936-1080

Respectfully Submitted,

By:   
Guy V. Tucker  
Registration No. 45,302

Date: June 29, 2009